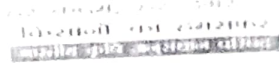


भा0 कू0 अ0 प0- राष्ट्रीय पादप आनुवंशिक संसाधन ब्यूरो  
ICAR-National Bureau of Plant Genetic Resources

पूसा परिसर नई दिल्ली-110012

Pusa Campus, New Delhi - 110012



Agrisearch with a human touch

Phone: 011-25841022

E-mail: prasen.jit@icar.gov.in

No. IGC/2007/PIII

Dated: 7 -01-2022

**OFFICE-ORDER**

Approval of the Director, ICAR-NBPGR is hereby conveyed to constitute Institute Grievance Committee of the Bureau as under :-

1. Dr. Ashok Kumar, Director (A)	Chairman
2. Dr. S. P. Ahlawat, Head(A), DPE&GC	Member
3. Dr. Pradyumna Kumar Jain, Head of Administration	Member
4. Sh. Prashant Sharma, Comptroller	Member
5. Sh. Prasen jit, Administrative Officer	Member Secretary

**Elected Members**

Scientific category:-

Dr. Sapna, Scientist (SS), DGE, ICAR-NBPGR, New Delhi

Technical category:-

Dr. Smita Lenka, ACTO, DGC, ICAR-NBPGR, New Delhi

Administrative category:-

Sh. Yogesh Kumar Gupta, Assistant, ICAR-NBPGR, New Delhi

Skilled Supporting category:-

Sh. Mahesh Ram, SSS, ICAR-NBPGR, New Delhi

The tenure of Institute Grievance Committee will be of two years from the date of issuance of this order.

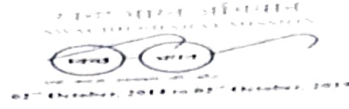
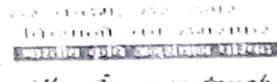


(Prasen jit)  
Administrative Officer

**Distribution:-**

1. All members (by name)
2. NBPGR staff
3. Incharge, AKMU to upload in the Bureau's website
4. Notice Board

भा0 कृ0 अ0 प0- राष्ट्रीय पादप आनुवंशिक संसाधन ब्यूरो  
ICAR-National Bureau of Plant Genetic Resources  
पूसा परिसर नई दिल्ली-110012  
Pusa Campus, New Delhi - 110012



Phone: 011-25841022

E-mail: prasen.jit@icar.gov.in

फाइल संख्या IGC/2007/PHI

Dated: 7-01-2022

**कार्यालय-आदेश**

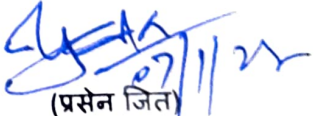
निदेशक, भाकृअनुप- रा.पा.अनु.सा.ब्यूरो के अनुमोदन एतद्वारा ब्यूरो की संस्थान शिकायत समिति के गठन के लिए निम्नानुसार सूचित किया जाता है: -

- |  |            |
|--|------------|
| 1. डॉ. अशोक कुमार, निदेशक (ए)                    | अध्यक्ष    |
| 2. डॉ. एस. पी. अहलावत, प्रमुख (ए), डीपीई और जीसी | सदस्य      |
| 3. श्री प्रद्युम्न कुमार जैन, प्रशासन प्रमुख     | सदस्य      |
| 4. श्री प्रशांत शर्मा, नियंत्रक                  | सदस्य      |
| 5. श्री प्रसेन जित, प्रशासनिक अधिकार             | सदस्य सचिव |

**निर्वाचित सदस्य**

- वैज्ञानिक श्रेणी:-डॉ सपना, वैज्ञानिक (एसएस), डीजीई, भाकृअनुप - रा.पा.अनु.सा.ब्यूरो, नई दिल्ली  
तकनीकी श्रेणी:-डॉ. स्मिता लेंका, एसीटीओ, डीजीसी, भाकृअनुप - रा.पा.अनु.सा.ब्यूरो, नई दिल्ली  
प्रशासनिक श्रेणी:-श्री योगेश कुमार गुप्ता, सहायक, भाकृअनुप- रा.पा.अनु.सा.ब्यूरो, नई दिल्ली  
कुशल सहायक श्रेणी:- श्री महेश राम, एसएसएस, भाकृअनुप - रा.पा.अनु.सा.ब्यूरो, नई दिल्ली

संस्थान शिकायत समिति का कार्यकाल इस आदेश के जारी होने की तिथि से दो वर्ष का होगा।

  
(प्रसेन जित)

प्रशासनिक अधिकारी

वितरण:-

1. सभी सदस्य (नाम से)
2. रा.पा.अनु.सा.ब्यूरो कर्मचारी
3. प्रभारी, एकेएमयू ब्यूरो की वेबसाइट पर अपलोड करें
4. नोटिस बोर्ड

**Guidelines on procedure for redressal of grievance of employees****INDIAN COUNCIL OF AGRICULTURAL RESEARCH  
KRISHI BHAVAN: NEW DELHI**

No.5-2/87-Per. IV

Dated the 10th February, 1989

To

The Directors/Project Directors of all  
the Research Institutes under ICAR

**Subject: Revised Grievance Redressal Procedure for ICAR Employees – Introduction of**

Sir,

With the approval of the GB and the President, ICAR, it has been decided to introduce with immediate effect a revised grievance redressal procedure as given in the "Annexure" to this letter in replacement of the existing scheme.

The new procedure covers both the gazetted and non-gazetted categories of officers and provides for a single machinery for redressal of their grievances in regard to service matters, etc. With the introduction of the new procedure, the existing Grievance Cells/Grievance Committees constituted at the various units of the Council stand dissolved forthwith. It is requested that the Grievance Committee/Grievance Cell as provided in the new Scheme may kindly be constituted immediately as per the procedure laid down therein.

Yours faithfully,

Sd/-  
(G.C. SRIVASTAVA)  
SECRETARY, ICAR

Copy forwarded for information and necessary action to:

1. The Secretary, ASRB, New Delhi
2. All DDGs/ADGs/Director (P)/ Director (F)
3. PS to DG/PS to Secretary, ICAR.
4. All Under-Secretaries /DA (R) /SA (V) /SA (M) /DD (P)
5. S (M)/ (L)/ DD (P) / DD (F)
6. A.O. I/I1/Cdn. (A&A) / Audit I/II/Per. I/II/III Sections.
7. All Ext. Estt. Sections/All Estt. Sections.
8. Secretary, Official Side/ Staff Side, CJSC, ICAR
9. Personal section of Minister (A)
10. Guard file.

Sd/-  
for Secretary, ICAR

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**INDIAN COUNCIL OF AGRICULTURAL RESEARCH  
KRISHI BHAVAN: NEW DELHI 110 001**

**GRIEVANCE REDRESSAL PROCEDURE**

(a)

**CONTENTS**

**PARAS**

1. Short Title
2. Definition
3. Grievance Committee
4. Constitution of Grievance Committee
5. Membership
6. Vacancies
7. Election
8. Power to co-opt
9. Terms of Grievance Committee
10. Scope of Grievance Committee
11. Meetings of Grievance Committee
12. Central Grievance cell
13. Procedure for Redressal of Grievances
14. General
15. Dissolution of Grievance Committees

**APPENDICES**

- i. Grievance Form I
- ii. Grievance Form II
- iii. Grievance Form III
- iv. Grievance Register Form
- v. Procedure for Election of Employees Representatives on Grievance Committee

(b)

**ANNEXURES**

- (i) FORM A: FORM OF NOMINATION PAPER FOR GRIEVANCE COMMITTEE ELECTION.
- (ii) FORM B: FORM OF AUTHORIZATION FOR REPRESENTATION IN SCRUTINY OF NOMINATION PAPER IN GRIEVANCE COMMITTEE ELECTION

## INDIAN COUNCIL OF AGRICULTURAL RESEARCH GRIEVANCE REDRESSAL PROCEDURE

The following procedure shall be followed in dealing with the individual complaints/ grievances of employees:

### 1. SHORT TITLE

This procedure shall be called ICAR Grievance Redressal Procedure.

### 2. DEFINITION

In this procedure unless the context otherwise requires:

- (i) 'ICAR' means the Indian Council of Agricultural Research and shall include its Headquarters Office/Institutes/Bureaux/Directorates/Laboratories/National Research Centres and their Regional Stations/Stations/Substations etc. located in different parts of the territory of India.
- (ii) 'Employee' for this purpose means an employee of the ICAR.
- (iii) 'Grievance' means complaints affecting an individual employee in respect of his:
  - (a) Salary
  - (b) Overtime
  - (c) Leave
  - (d) Transfer
  - (e) Seniority
  - (f) Training opportunities
  - (g) Research facilities
  - (h) Completion of probationary period/confirmation (except any decision of a duly constituted Committee in accordance with the provisions of Bye-Laws/Rules regarding completion of probationary period/confirmation)
  - (i) Promotions / recruitments (except the promotions/ recruitments made on the recommendations of the ASRB Departmental Promotion Committee/Selection Committee, in accordance with the provisions of the Bye-Laws/Rules)
  - (j) Other working conditions

Where the grievance is of general applicability or of collective nature, it shall fall outside the scope of this procedure.

### 3. GRIEVANCE COMMITTEE

There shall be a Grievance Committee in each Institute/Directorate/Laboratory/National Research Centre and at the Headquarters Office of the ICAR.

### 4. CONSTITUTION OF GRIEVANCE COMMITTEE

- 'A' 1. *Institute/Directorate/Laboratory etc. Grievance Committee*  
The constitution of Grievance Committee for each Institute/Directorate/Laboratory/ etc. will be as follows:
- (a) Director --- Chairman
  - (b) Head of a Division (one) (To be nominated by the Management Committee of the Institute) --- Member



- |     |   |  |                                |
|-----|---|--|--------------------------------|
| (c) | Chief Administrative Officer/<br>SAO/AO (one) (To be nominated by<br>the Management Committee of the Institute) | ---  | Member                         |
| (d) | Chief Account Officer/SAO/AO (one)<br>(To be nominated by the Management<br>Committee of the Institute).        | ---  | Member                         |
| (e) | Five representatives of employees<br>(one from each of the following categories) :                              | ---  |                                |
|     | (i) Scientific - To be elected  | -  | Member                         |
|     | (ii) Technical - To be elected  | -  | Member                         |
|     | (iii) Auxiliary - To be elected   | -  | Member                         |
|     | (iv) Administrative - To be elected   | -  | Member                         |
|     | (v) Supporting - To be elected  | -  | Member                         |
|     | (f) Administrative<br>Officer/AAO<br>(Other than<br>incharge of<br>Administration)                              | To be elected<br>To be nominated<br>by the Director/<br>Head | -<br>-<br>Member-<br>Secretary |

## 2. Headquarters Grievance Committee

The constitution of Grievance Committee for the Headquarters of the ICAR will be as follows:

- |     |   |   |              |
|-----|---|---|--------------|
| (a) | One DDG/ADG<br>(To be nominated by the DG, ICAR)  | - | Chairman     |
| (b) | Scientist/Technical Officer of the<br>status of Scientist S-3 Grade or<br>above (one )<br>(To be nominated by DG, ICAR) | - | Member       |
| (c) | Dy. Secretary (one)<br>(To be nominated by DG, ICAR)  | - | Member       |
| (d) | Dy. Director/Under-Secretary (one)<br>(To be nominated by DG, ICAR)   | - | Member       |
| (e) | Five representatives of employees in<br>the Headquarters (one from each of the<br>following categories) :               |   |              |
|     | (i) Scientific - To be elected  | - | Member       |
|     | (ii) Technical - To be elected  | - | Member       |
|     | (iii) Auxiliary - To be elected   | - | Member       |
|     | (iv) Administrative - To be elected   | - | Member       |
|     | (v) Supporting - To be elected  | - | Member       |
| (f) | Under-Secretary (Vigilance)   | - | Member-Secy. |

## 5. MEMBERSHIP

- (1) No person who is not an employee of the ICAR, shall be a member of any Grievance Committee
- (2) The term of membership shall be two years

- (3) There shall be no bar to re-nomination/re-election of a member after the expiry of his term

#### **6. VACANCIES**

- (1) If a member is transferred from the concerned unit, he shall cease to be a member of the concerned Grievance Committee. The resultant vacancy shall be filled for the unexpired period of the term in the same manner as the position vacated by the member was filled earlier.
- (2) Vacancy caused by death, retirement, resignation, termination, removal or dismissal, deputation or in any event of the employee ceasing to be employed in the ICAR or the concerned units or otherwise, shall be filled for the unexpired period of the term in the same manner as the position vacated by the member was filled earlier.
- (3) Any elected member representing the employees, who without obtaining prior permission of the Chairman of the Grievance Committee, fails to attend three consecutive meeting of the Committee, the resultant vacancy shall be filled for the unexpired period of the term in the same manner as the position vacated by the member was filled earlier.

#### **7. ELECTED**

The procedure for election of members representing employees is prescribed in Appendix - IV.

#### **8. POWER TO CO-OPT**

The Grievance Committee shall have the power to co-opt in a consultative capacity a person(s) employed in the same unit for having particular or special knowledge of a matter under consideration. Such co-opted member(s) shall not be entitled to vote and shall be present at the meeting(s) only for the period during which the particular question is before the Grievance Committee.

#### **9. TERMS OF THE GRIEVANCE COMMITTEE**

Each grievance Committee shall be reconstituted every two years.

#### **10. SCOPE OF GRIEVANCE COMMITTEE**

- (1) The scope of the Grievance Committee shall be as follows:
  - (a) The Grievance Committee will provide an apparatus in the institutional framework that may:
    - (i) facilitate easy access to individuals for ventilating their own personal grievances;
    - (ii) ensure speedy consideration of grievance and decision thereon;
    - (iii) impart a degree of objectivity and fairplay in the whole process.
  - (b) The Grievance Committee should not look only into technicalities but would help to establish good communication between the office of the unit and the employees.
  - (c) The Grievance Committee should make every effort to remove misunderstandings and to develop congenial atmosphere in the Unit.
- (2) The Grievance Committee shall consider only individual grievances of specific nature of an employee raised personally by the concerned aggrieved employee.

- (3) The Grievance Committee shall not consider:
  - (a) any grievance relating to subjects for which separate committees exist.
  - (b) any grievance of general applicability or of collective nature or raised collectively by more than one employee.
  - (c) any grievance arising out of disciplinary action having been taken against an employee under Disciplinary Rules.

#### 11. MEETING OF THE GRIEVANCE COMMITTEE

- (1) The Grievance Committee will meet at least once in a month. However, it may also meet more often as and when necessary, at the instance of its Chairman/ Member-Secretary.
- (2) The notice of the meeting shall be given by the Member-Secretary at least three days prior to the date of meeting.
- (3) The agenda of the meeting shall be prepared by the Member-Secretary taking into account the grievance submitted to him. The agenda papers shall be circulated by the Member-Secretary to the Members along with the notice of the meeting.
- (4) The presence in a meeting of at least six members of the Grievance Committee, comprising a minimum of three elected representative members and three other members, shall be necessary to form a quorum.
- (5) If in a complaint, allegations are made against a member of the Grievance Committee, that member shall not associate himself with the deliberations of the Committee in the concerned case. Similarly, where a member of the Grievance Committee makes a complaint to the Committee, he will not attend the meeting(s) of the Committee, when his representation is being considered by the Committee.
- (6) The Grievance Committee will evolve its own procedure, on mutually agreed principles, for the conduct of business in the meetings of the Committee, within the framework of this Grievance Procedure. The procedure should be evolved at its first meeting and developed during a few subsequent meetings, if necessary.
- (7) The Headquarters Administration/Director or Head of Institute, etc. shall arrange for providing necessary accommodation for holding meetings of the Grievance Committee. He shall also provide all necessary facilities to the Committee and the member thereof for carrying out the work of the Committee.
- (8) The Grievance Committee shall ordinarily meet during working hours of the concerned unit on any working day and the employees representatives shall be deemed to be on duty while attending the meeting.

#### 12. CENTRAL GRIEVANCE CELL

In addition to the Grievance Committee at the ICAR Headquarters/Institute/Bureau/Directorate/Laboratory/National Research Centre/etc., there will be a Central Grievance Cell at the ICAR Headquarters. The Constitution of the Central Grievance Cell will be as under:-

- |    |                                  |            |
|----|----------------------------------|------------|
| 1. | Dy DG<br>(To be nominated by DG) | - Chairman |
| 2. | Director DARE                    | - Member   |
| 3. | Director (P)                     | - Member   |
| 4. | Director (F)                     | - Member   |



5. Dy Secretary - Member-Secy.  
(To be nominated by DG)

**13. PROCEDURE FOR REDRESSAL OF GRIEVANCES**

**1. Stage I - Verbal Representation to Sectional Head**

- (a) An aggrieved employee may present his grievances verbally in person to his sectional head within 7 working days from the date on which the cause of grievance or complaint arose or took place.
- (b) The Sectional Head will give his verbal reply to the employee within 7 working days from the date of receipt of verbal complaint.

**2. Stage II - Application to Dy Secretary/CAO/Sr AO/AO Incharge of Administration**

- (a) If the aggrieved employee is not satisfied with the verbal reply of the Sectional Head or if he fails to receive any verbal reply from him within the stipulated period of 7 working days, he may submit an application stating his grievance in Grievance Form-I prescribed in Appendix-I, in duplicate, to Dy Secretary/CAO/Sr AO/AO Incharge of Administration within a period of 21 working days from date on which the cause of grievance arose or took place.
- (b) Head of the Institute/ Bureau/ Directorate/ Laboratory/ National Research Centre/ Headquarters Office may, at his discretion, relax this time limit by a period not exceeding 7 working days, where he is satisfied that there are genuine reasons due to which the employee could not submit his grievance within the stipulated time limit of 21 working days.
- (c) All such grievances shall be acknowledged and entered in the Grievance Register maintained for the purpose in Form-III prescribed in Appendix-IV, by the Dy. Secretary/CAO/Sr. AO/ AO Incharge of Administration. He will send one copy of the application to the sectional Head concerned for his report and return the same within 3 working days. The Dy Secretary/CAO/Sr. AO/AO Incharge of Administration will also make necessary enquiries from the Sectional Head of the employee and given reply to the employee within 10 days of the date of receipt of grievance in Grievance Form I. The duplicate copy of Grievance Form-I, duly completed and filled in, will be maintained as Office record.

**3. Stage III - Application to Grievance Committee**

- (a) If the employee is not satisfied with the decision communicated to him by the Dy Secretary/CAO/Sr AO/AO Incharge of Administration or fails to receive a reply within the stipulated period, he may present his grievance to the Grievance Committee in Grievance Form-II, (prescribed in Appendix 2) in duplicate, within 10 working days of receipt of reply by him at Stage II or on failure to receive any reply with stipulated period as the case may be, stating the reason why he is not satisfied with the reply received by him at Stage II.
- (b) On receipt of written grievance application, in duplicate, in Grievance Form-II, the Member-Secretary of the Grievance Committee, shall acknowledge receipt of the application and enter it in the Grievance Register maintained for the "Competent Authority" for his perusal and action and for return with his comments to the Member-Secretary within 10 working days. The "Competent Authority" in this respect will be that authority who can have the grievance redressed.

- (c) The Member-Secretary shall submit to the Grievance Committee all application of grievances received in Grievance Form-II irrespective of whether any reply has been received from the Competent Authority where such comments have been received. These shall also be submitted for consideration of the Grievance Committees along with the grievance application.
  - (d) The Grievance Committee shall consider the grievance in detail and for the purpose may call the aggrieved employee for discussion or for presentation of further facts. The Grievance Committee shall also take into account the comments of the Competent Authority and obtain such further clarification from him as may be deemed necessary. Thereafter, decision shall be taken by the Grievance Committee on the grievance before it. The decision shall be in conformity with the relevant Bye-Laws, Rules and Regulations of the ICAR in force.
  - (e) In the event of a unanimous decision of the Grievance Committee, the decision of the Committee along with all the relevant papers shall be placed before the Director/Secretary, ICAR.
  - (f) Normally, the Director/Secretary, ICAR should endeavour to accept and implement the unanimous decision of the Grievance Committee, provided that the said decisions are not violation of Bye-laws, Rules and Regulations of the ICAR in force, do not have implications on identical issues in other Units, are within the power of Director/Secretary, as the case may be, to authorize such implementation and are otherwise incorrect or unacceptable.
  - (g) If, however, Director/Secretary, ICAR, finds that the unanimous decisions of the Grievance Committee are in violation of the Bye-laws, Rules and Regulation of the ICAR in force or have implications on identical issues in other Units or are not within the powers of Director/Secretary as the case may be, to authorize its implementation or is otherwise incorrect or unacceptable, he shall call a meeting of the Grievance Committee and shall discuss the case with the Grievance Committee in this meeting. He may also call the aggrieved employee for discussion. Thereafter, the Director/Secretary, ICAR, shall decide the case as he may deem fit and he shall record his decision giving his views and reasons in detail.
  - (h) In the event of difference of opinion, among the members of Grievance Committee, the views of the members along with all the relevant papers, shall be placed before the Director/Secretary, ICAR, and he shall decide the case as he may deem fit and he shall record his decision giving his views and reasons in detail.
  - (i) The final decision of the Director/Secretary, ICAR, shall be communicated to the aggrieved employee in writing within 10 working-days from the meeting of the Grievance Committee to help decide upon the grievance/discuss it with Directory/Secretary, ICAR.
4. **Stage IV - Application to Central Grievance Cell**
- (a) If the employee is not satisfied with the decision of the Director/Secretary, ICAR, he may make a representation to the Central Grievance Cell for redressal of his grievance in Form-II prescribed in Appendix III, in duplicate, within 10 working days of receipt of reply by him at Stage III or on failure to receive any reply, as the case may be, stating the reason for not being satisfied with the reply received by him at Stage III.



- (b) On receipt of the written grievance application, in duplicate, in Grievance Form III the Member-Secretary of the Central Grievance Cell shall acknowledge receipt of the application and enter it in the Grievance Register maintained for the purpose and obtain the comments of the Director/Secy, ICAR, and the findings of the Grievance Committee within 10 working days.
- (c) The Member-Secretary shall submit to the Central Grievance Cell all applications of grievances received in Grievance Form III along with the comments of the Director/Secretary, ICAR, and the report of the Grievance Committee.
- (d) The Central Grievance Cell shall consider the grievance in detail on the basis of the material furnished by the aggrieved comments of the Director/Secretary, ICAR, and the findings of the Grievance Committee and take a decision thereon.
- (e) The decision of the Central Grievance Cell will be intimated by the Member-Secretary to the Director/Secretary, ICAR, as the case may be, who shall communicate the same to the aggrieved employee in writing.

**5. State V - Appeal to the Director-General, ICAR**

If the employee is still not satisfied with the decision of the Grievance Cell taken on the basis of the findings of the Central Grievance Cell, he shall have the right to appeal to the Director-General, ICAR, within 30 working days from the date of receipt of the decision.

**13. GENERAL**

1. All Grievances, Forms/Applications shall be signed and dated by the aggrieved employee himself.
2. (a) If the grievance arises but of an order given by the competent or superior officer, such order shall be complied with before the employee invokes procedure laid down for redressal of grievances.
- (b) If, however, there is a time lag between the issue of an order and its compliance, the Grievance Procedure may immediately be invoked but the order nevertheless must be complied within the due date.
- (c) In exceptional cases, where an order if complied with will adversely affect, materially and substantially the aggrieved employees and if it can be reasonably apprehended that it will not be possible to undo the said adverse affect on a subsequent date, the aggrieved employee may apply for redressal of his grievance to the Dy Secretary/ CAO/ Sr AO/AO Incharge of Administration directly in Grievance Form-I at the earliest and may also apply immediately thereafter to the authority which had passed the said order to stay the order till the disposal of his grievance application, mentioning in his stay application, the grievance serial no. and date of receipt obtained from the Dy. Secretary/CAO/ Sr AO/AO Incharge of Administration and the reason for which the stay order has been requested for. The officer to whom the application for stay order has been made will consider the application on merit and will pass necessary orders, as he may deem fit, in writing and communicate the same immediately to the aggrieved person.
3. If the grievance of the aggrieved employees is against his immediate supervisor, the aggrieved employee may present his grievance directly in Grievance Form-I to the Dy Secretary/ CAO/ Sr AO/ AO Incharge of Administration without going through the procedure of making verbal representation to his Supervisor.
4. In the matter of grievances relating to promotion, the aggrieved employee will

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present an application directly in Grievance Form-II, in duplicate, stating his grievances to the Grievance Committee within a period of 21 days from the date of receipt of such promotion order. However, the Director of the Institute/Bureau/Directorate/ Laboratory/ National Research Centre/ etc. Secretary, ICAR, may, at his discretion, relax this time limit by a period not exceeding 7 working days where he is satisfied that there are genuine reasons due to which the employee could not submit his grievance within the stipulated time limit.

5. Once a grievance is presented to the Grievance Committee or the Central Grievance Cell, no representation/ appeal on the same grievance shall be entertained by any authority in the ICAR, pending decision of the grievance Committee/ Central Grievance Cell.
6. Grievance placed before the Grievance Committee and Central Grievance Cell shall not be admitted again for consideration before any other Committee etc. of the Institute/ Bureau/Directorate/ Laboratory/ National Research Centre/ Headquarters Office, etc.
7. This 'Grievance Procedure' is in addition to the existing machinery of redressal of grievances under the Central Civil Services (Classification, Control and Appeal) rules.

#### **DISSOLUTION OF GRIEVANCE COMMITTEE**

The Director-General/ Director of Institute/ Bureau/ Laboratory/ National Research Centre etc. as the case may be, may after making such enquiry, as he may deem fit dissolve the concerned Grievance Committee at any time by an order in writing if he is satisfied that the Committee has not been constituted in accordance with the procedure laid down or that not less than three elected representatives of the employees have, without any reasonable justification, failed to attend three consecutive meetings of the Committee or that the Committee has, for any other reason, ceased to function.

Provided that where a Grievance Committee is so dissolved, the Director-General/ Director of the Institute/ Bureau/ Directorate/ Laboratory/ National Research Centre etc. should endeavour to take steps to reconstitute the Committee within 60 days of its dissolution in accordance with the provisions laid down.



# INDIAN COUNCIL OF AGRICULTURAL RESEARCH

Name of the Institute/ Bureau/ Directorate/ Laboratory/ National Research Centre etc.

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## GRIEVANCE FORM - I

### PART - I

#### APPLICATION FOR GRIEVANCE REDRESSAL - TO DY. SECRETARY/ CAO/ SR. A.O./ A.O. INCHARGE OF ADMINISTRATION

**(TO BE FILLED IN BY THE AGGRIEVED EMPLOYEE CONCERNED)**

- Note:
1. This Form is to be filled in by the concerned aggrieved employee in *duplicate*.
  2. Only Part I of this Form is to be filled in by the concerned aggrieved employee. He must put his dated signature on this Form at the end of Part I as indicated, otherwise, the application will not be entertained.
  3. The rest of the Parts of this Form are to be filled in by the Office of Dy. Secretary/ CAO/ Sr. AO/ AO Incharge of Administration.
  4. This application should be presented by the aggrieved employee to the Dy. Secretary/ CAO/ Sr. A.O./ A.O. Incharge of Administration and his acknowledgement of receipt in Grievance Form - I, Part IV *must be obtained immediately*.
  5. Please strike off the words/ portions not applicable.
  6. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this Part of the Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of the every sheet must be duly signed by the concerned person.

Name \_\_\_\_\_ Designation \_\_\_\_\_

Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_

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**GRIEVANCE IN BRIEF:**

(a) Full facts:

(b) Redress requested:

Signature of the aggrieved employee.

GRIEVANCE FORM - I

PART - II

INVESTIGATION

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**(FOR OFFICE USE ONLY)**

- Note: 1. Part - II of this Form is for action to be taken in the Office of Dy. Secretary/ CAO/ Sr. A.O./ A.O. Incharge of Administration and should be maintained in the Office as record.
2. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this part of the Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.
- 

Grievance Serial No. \_\_\_\_\_ Date of Receipt \_\_\_\_\_

Forwarded for immediate  
examination and report,  
to Sectional Head.

Name \_\_\_\_\_  
Designation \_\_\_\_\_  
Section/ Division \_\_\_\_\_

Date forwarded \_\_\_\_\_

Dated \_\_\_\_\_

Signature of Dy. Secretary/ CAO/  
Sr. A.O./ A.O. Incharge of  
Administration

**REPORT OF SECTIONAL HEAD**

Date of return to Dy. Secretary/ CAO/ Sr. A.O./ A.O. Incharge of Administration \_\_\_\_\_

Date \_\_\_\_\_

Signature of Sectional Head

Investigation Report of Dy. Secretary/ CAO/ Sr. A.O./ A.O. Incharge of Administration based on the report of the Sectional Head.

---

Dated \_\_\_\_\_

Signature of Dy. Secretary/ CAO/  
Sr. A.O./ A.O. Incharge of  
Administration

---

**GRIEVANCE FORM - I**

**PART - III**

**REPLY ON GRIEVANCE  
(TO BE GIVEN TO AGGRIEVED EMPLOYEE CONCERNED)**

- Note: 1. Part III of this Form is for action to be taken in the Office of Dy. Secretary/ CAO/ Sr. A.O./ A.O. Incharge of Administration and after completion of investigation should be duly filled in and his acknowledgement of receipt obtained on the duplicate copy of this Part.
2. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this Part of the Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.

Name \_\_\_\_\_ Designation \_\_\_\_\_  
Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_  
Grievance Serial Number \_\_\_\_\_  
Date of receipt \_\_\_\_\_

---

Reply of Dy. Secretary/ CAO/ Sr. A.O./ A.O. Incharge of Administration after investigation mentioning his decision along with reasons:

Dated \_\_\_\_\_

Signature of Dy. Secretary/ CAO/  
Sr. A.O./ A.O. Incharge of  
Administration



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**ACKNOWLEDGEMENT OF THE AGGRIEVED COMMITTEE**

Grievance Serial No. \_\_\_\_\_  
Received a copy of reply in Grievance Form, Part III.

Dated \_\_\_\_\_

Signature of the aggrieved employee.

Name \_\_\_\_\_

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**GRIEVANCE FORM - I**  
**PART - IV**  
**ACKNOWLEDGEMENT**  
**(TO BE GIVEN TO AGGRIEVED EMPLOYEE CONCERNED)**

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Note: Part IV of this Form is to be filled in by the Office of Dy. Secretary/ CAO/ Sr. A.O./ A.O. Incharge of Administration immediately on receipt of application for grievance redressal Form - I, and given to the concerned employee as acknowledgement and his acknowledgement of receipt be obtained on the duplicate copy of this Part.

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Received an application for grievance redressal in Grievance Form - I, from:

Name \_\_\_\_\_ Designation \_\_\_\_\_  
Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_  
Grievance Serial No. \_\_\_\_\_  
Date of Receipt \_\_\_\_\_

Dated \_\_\_\_\_

Signature of Dy. Secretary/ CAO/  
Sr. A.O./ A.O. Incharge of  
Administration

---

**ACKNOWLEDGEMENT OF THE AGGRIEVED EMPLOYEE**

Grievance Serial No. \_\_\_\_\_  
Received a copy of acknowledgement in grievance Form - I, Part - IV.  
Date \_\_\_\_\_

Signature of the aggrieved  
employee.

Name \_\_\_\_\_

## INDIAN COUNCIL OF AGRICULTURAL RESEARCH

Name of the Institute/ Bureau/ Directorate/ Laboratory/ National  
Research Centre etc. \_\_\_\_\_

### GRIEVANCE FORM - II PART - I

#### APPLICATION FOR GRIEVANCE REDRESSAL - TO GRIEVANCE COMMITTEE

(To be filled in by the aggrieved employee concerned)

- Note:
1. This form is to be filled in by the concerned aggrieved employee in *duplicate*.
  2. Only 'Part - I' of this Form is to be filled in by concerned aggrieved employee. He must put his dated signature on this Form at the end of Part - I as indicated, otherwise the application will not be entertained.
  3. The rest of the Parts of this Form are to be filled in by the Office of Member Secretary, Grievance Committee.
  4. This application should be presented by the aggrieved employee to the Member Secretary Grievance Committee and his acknowledgement of receipt in Grievance Form - II Part VI, must be obtained immediately.
  5. Please strike off the words/ portions not applicable.
  6. Wherever the space provided in a column is found insufficient, separate sheets may be used. Those sheets must be serially numbered and attached to this form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.

Name \_\_\_\_\_ Designation \_\_\_\_\_

Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_

Whether you had applied earlier  
in Grievance Form - I Yes/ No

1. If the answer to the above is 'Yes', please give following details:

Grievance Serial No. \_\_\_\_\_

Date of receipt  
by Dy. Secretary/ CAO/ Sr. A.O./  
A.O. Incharge of Administration

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Date of Reply of Dy. Secretary/ CAO/  
Sr. A.O./ A.O. Incharge of  
Administration \_\_\_\_\_

Brief decision communicated  
in the reply:

Reason for appeal:

Redress requested:

2. If the answer to above is 'NO', please give following details:

Reason for not applying in Form - I:

Grievance in brief:

(a) Full facts:

(b) Redress requested:

Date \_\_\_\_\_

Signature of the aggrieved  
employee.



**GRIEVANCE FORM - II**

**PART - II  
INVESTIGATION**

**(For Office use only)**

- 
- Note: 1. Part - II of this Form is for action to be taken in the office of the Member Secretary, Grievance Committee and should be maintained in the Office as record.
2. "Competent Authority" referred to below should normally be that authority who can have the grievance redressed.
3. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this Part of the Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.
- 

Grievance Serial No. \_\_\_\_\_ Date of Receipt \_\_\_\_\_

Name of the aggrieved employee \_\_\_\_\_

Forwarded for immediate examination and comments, to the competent authority. Name \_\_\_\_\_

Designation \_\_\_\_\_

Section/ Division \_\_\_\_\_

Date forwarded \_\_\_\_\_

Date \_\_\_\_\_

Signature of Member Secretary,  
Grievance Committee.

---

Comments of the "Competent Authority".

Date of return to Member Secretary, Grievance Committee

Date \_\_\_\_\_

Signature of the "Competent  
Authority".

**GRIEVANCE FORM - II**

**PART - III  
PROCEEDINGS OF GRIEVANCE COMMITTEE**

(For office use only)

- 
- Note: 1. Part III of this Form is for action to be taken in the Office of the Member Secretary, Grievance Committee and should be maintained in the Office as record.  
2. Please strike off the works/ portions not applicable.  
3. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.
- 

Grievance Serial No. \_\_\_\_\_  
Name of the aggrieved employee \_\_\_\_\_

---

Date on which grievance put up to  
Grievance Committee

1. _____	2. _____
3. _____	4. _____
5. _____	6. _____

Date on which decided by  
Grievance Committee \_\_\_\_\_

Decision: Unanimous/ Not Unanimous

Details of decision/ views of Grievance Committee  
along with reasons:

Date _____	Signature of Member Secretary Grievance Committee	Signature of Chairman Grievance Committee
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---

Date forwarded to Director/ Secretary, ICAR  
for decision \_\_\_\_\_

Date \_\_\_\_\_

Signature of Member  
Secretary, Grievance  
Committee.

**GRIEVANCE FORM - II**

**PART - IV  
ACTION BY DIRECTOR/ SECRETARY, ICAR**

(For office use only)

- 
- Note: 1. Part - IV of this form is for action to be taken in the office of Director/ Secretary, ICAR and should be maintained in the office as record.
2. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this part of the Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.

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Grievance Serial No. \_\_\_\_\_

Name of the aggrieved Committee \_\_\_\_\_

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Applicable only in the case of difference of opinion in Grievance Committee (Decision not unanimous):

Discussed with Grievance Committee on the (date) \_\_\_\_\_

Discussed with aggrieved employee on (date) \_\_\_\_\_

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Applicable in all cases whether Grievance Committee's Decision is unanimous or not:

Date of final decision \_\_\_\_\_

Details of final decision along with reasons:

Date of return to Member Secretary,  
Grievance Committee \_\_\_\_\_

Date \_\_\_\_\_

Signature of Director/ Secretary,  
ICAR

**GRIEVANCE FORM - II  
PART - V**

**(To be given to employee concerned)**

- 
- Note: 1. Part- V of this Form is for action to be taken in the office of the Member Secretary, Grievance Committee and should be duly filled in after the final decision of Director/ Secretary, ICAR is received by him in Part IV of this form and should be given to the concerned employee and his acknowledgement of receipt be obtained on the duplicate copy of this part.
2. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this Part of the Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.

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Name _____	Designation _____
Section/ Division _____	Grade _____
Grievance Serial No. _____	Date of Receipt _____

---

Final decision with reasons of Director/ Secretary,  
after consideration of decision of Grievance Committee.

---

Date \_\_\_\_\_

Signature of Member Secretary,  
Grievance Committee

---

**ACKNOWLEDGEMENT OF THE AGGRIEVED EMPLOYEE**

Grievance Serial No. \_\_\_\_\_

Received a copy of reply in Grievance Form - II, Part - V.

Date \_\_\_\_\_

Signature of the aggrieved  
employee

Name \_\_\_\_\_

**GRIEVANCE FORM - II  
PART - VI**

**ACKNOWLEDGEMENT**

**(To be given to aggrieved Committee concerned)**

---

Note: Part VI of this form is to be filled in by the office of the Member Secretary, Grievance Committee, immediately on receipt of application for grievance redressal in Form - II, Part - I, and given to the concerned employee as acknowledgement and his acknowledgment of receipt be obtained on the duplicate copy of this Part.

---

Received an application for grievance redressal in Grievance Form - II from:

Name \_\_\_\_\_ Designation \_\_\_\_\_

Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_

Grievance Serial No. \_\_\_\_\_ Date of Receipt \_\_\_\_\_

Date \_\_\_\_\_

Signature of Member Secretary,  
Grievance Committee

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**ACKNOWLEDGEMENT OF THE AGGRIEVED EMPLOYEE**

Grievance Serial No. \_\_\_\_\_  
Received a copy of acknowledgment in Grievance  
Form - II, Part - VI.

Date \_\_\_\_\_

Signature of the aggrieved employee

Name \_\_\_\_\_

## INDIAN COUNCIL OF AGRICULTURAL RESEARCH

Name of the Institute/ Bureau/ Directorate/ Laboratory/  
National Research Centre etc. \_\_\_\_\_

### GRIEVANCE FORM - III PART - I

#### APPLICATION FOR GRIEVANCE REDRESSAL - TO CENTRAL GRIEVANCE CELL (To be filled in by the aggrieved employee concerned)

- Note:
1. This form is to be filled in by the concerned aggrieved employee in *duplicate*.
  2. Only 'Part - I' of this Form is to be filled in by concerned aggrieved employee. He must put his dated signature on this Form at the end of Part - I as indicated, otherwise the application will not be entertained.
  3. The rest of the Parts of this Form are to be filled in by the office of Member Secretary, Central Grievance Cell.
  4. This application should be presented by the aggrieved employee to the Member Secretary Central Grievance Cell and his acknowledgment of receipt in Grievance Form - III Part VI, must be obtained immediately.
  5. Please strike off the words/ portions not applicable.
  6. Wherever the space provided in a column is found insufficient, separate sheets may be used. Those sheets must be serially numbered and attached to this form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.

Name \_\_\_\_\_ Designation \_\_\_\_\_

Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_

Whether you had applied earlier in Grievance Form: \_\_\_\_\_ Yes/ No

1. If the answer to the above is Yes, please give following details:

Grievance Serial No. \_\_\_\_\_ Date of receipt \_\_\_\_\_  
by Member Secretary,  
Grievance Committee.

Date of Reply of Directors/  
Secretary, ICAR \_\_\_\_\_



---

Brief decision communicated in the reply:

Reason for appeal:

Redress Requested:

Signature of the aggrieved employee.

**GRIEVANCE FORM - II**

**PART - II  
INVESTIGATION  
(For office use only)**

- Note: 1. Part - II of this Form is for action to be taken in the office of the Member Secretary, Central Grievance Cell and should be maintained in the office as record.
2. "Competent Authority" referred to below should normally be that authority who can have the grievance redressed.
3. Wherever the space provided in a column is found insufficient, separate sheet may be used. These sheets must be serially numbered and attached to this Part of the Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.

Grievance Serial No. \_\_\_\_\_ Date of Receipt \_\_\_\_\_

Name of the aggrieved employee \_\_\_\_\_

Forwarded for immediate  
examination and comments,  
to the Competent Authority.

Name \_\_\_\_\_

Designation \_\_\_\_\_

Section/ Division \_\_\_\_\_

Date forwarded \_\_\_\_\_

Date \_\_\_\_\_

Signature of Member  
Secretary, Central  
Grievance Cell.

Comments of the "Competent Authority".

Date of return to Member Secretary, Grievance Cell \_\_\_\_\_

Date \_\_\_\_\_

Signature of the  
"Competent Authority"

**GRIEVANCE FORM - III**

**PART - III  
PROCEEDINGS OF GRIEVANCE CELL  
(For office use only)**

- 
- Note: 1. Part III of this Form is for action to be taken by the office of the Member Secretary, Central Grievance Cell and should be maintained in the office as record.  
2. Please strike off the words/ portions not applicable  
3. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this Form. References of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.
- 

Grievance Serial No. \_\_\_\_\_  
Name of the aggrieved employee \_\_\_\_\_

---

Dates on which grievance put up to Central Grievance Cell

1. _____	2. _____
3. _____	4. _____
5. _____	6. _____

Date on which decided by Central Grievance Cell \_\_\_\_\_

Decision: Unanimous/ Not Unanimous

Details of decision/ views of Central Grievance Cell along with reasons:

Date _____	Signature of Member Secretary Central Grievance Cell	Signature of Chairman Central Grievance Cell
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Date forwarded to Director/ Secretary, ICAR for decision \_\_\_\_\_

Date \_\_\_\_\_

Signature of Member  
Secretary, Central  
Grievance Cell

**GRIEVANCE FORM - III**

**PART - IV**  
**ACTION BY DIRECTOR/ SECRETARY, ICAR**  
**(For office use only)**

- 
- Note: 1. Part - IV of this form is for action to be taken in the office of Director/ Secretary, ICAR and should be maintained in the office as record.
2. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this Form. References of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.
- 

Grievance Serial No. \_\_\_\_\_

Name of the aggrieved employee \_\_\_\_\_

---

Applicable only in the case of difference of opinion in Central Grievance Cell (Decision not unanimous):

Discussed with Central Grievance Cell on the (date) \_\_\_\_\_

Discussed with aggrieved employee on (date) \_\_\_\_\_

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Applicable in all cases whether Central Grievance Cell's Decisions is unanimous or not:

Date of final decision \_\_\_\_\_

Details of final decisions along with reasons:

Date of return to Member Secretary, Grievance Cell \_\_\_\_\_

Date \_\_\_\_\_

Signature of Director/  
Secretary, ICAR

**GRIEVANCE FORM - III**

**PART - V**

(To be given to employee concerned) -

- 
- Note: 1. Part - V of this Form is for action to be taken in the Office of the Member Secretary, Grievance Cell and should be duly filled in after the final decision of Director/ Secretary, ICAR is received by him in Part IV of this Form and should be given to the concerned employee and his acknowledgment of receipt be obtained on the duplicate copy of this part.
2. Wherever the space provided in a column is found insufficient, separate sheets may be used. These sheets must be serially numbered and attached to this Form. Reference of the appropriate sheet number should be made in the relevant column of this Form. Each page of every sheet must be duly signed by the concerned person.
- 

Name \_\_\_\_\_ Designation \_\_\_\_\_  
Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_  
Grievance Serial No. \_\_\_\_\_ Date of receipt \_\_\_\_\_

---

Final decision with reason of Director/ Secretary,  
ICAR after consideration of decision of Central Grievance Cell

---

Date \_\_\_\_\_ Signature of Member Secretary,  
Central Grievance Cell

---

**ACKNOWLEDGMENT OF THE AGGRIEVED EMPLOYEE**

Grievance Serial No. \_\_\_\_\_  
Received a copy of reply in Grievance Form - III, Part - V.

Date \_\_\_\_\_

Signature of the aggrieved  
employee

Name \_\_\_\_\_

**GRIEVANCE FORM - III**

**PART - VI  
ACKNOWLEDGMENT**

**(To be given to aggrieved employee concerned)**

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Note: Part VI of this form is to be filled in by the Office of the Member Secretary, Central Grievance Cell, immediately on receipt of application for grievance redressal in Form - II, Part - I, and given to the concerned employee as acknowledgment and his acknowledgement of receipt be obtained on the duplicate copy of this Part.

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Received an application for grievance redressal in Grievance Form - III from:

Name \_\_\_\_\_ Designation \_\_\_\_\_

Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_

Grievance Serial No. \_\_\_\_\_

Signature of Member  
Secretary, Central  
Grievance Cell

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**Acknowledgment of the Aggrieved employee**

Grievance Serial No. \_\_\_\_\_

Received a copy of acknowledgment in Grievance Form - II, Part - VI.

Date \_\_\_\_\_

Signature of the aggrieved  
employee.

Name \_\_\_\_\_



## INDIAN COUNCIL OF AGRICULTURAL RESEARCH

Name of the Institute/ Bureau/ Directorate/ Laboratory/ National Research Centre etc.

### FORM - III GRIEVANCE - REGISTER FORM

Grievance Serial No. \_\_\_\_\_

Aggrieved employee: Name \_\_\_\_\_ Designation \_\_\_\_\_

Section/ Division \_\_\_\_\_ Grade \_\_\_\_\_

GRIEVANCE FORM - I	GRIEVANCE FORM - II (GRIEVANCE COMMITTEE)	GRIEVANCE FORM - III (CENTRAL GRIEVANCE CELL)	APPEAL	REMARKS
Date received _____ Reply-Officer incharge _____ Date _____ Brief _____ Content _____	Date received _____ Reply-Director/ Secretary, ICAR _____ Date _____ Brief _____ Content _____	Date received _____ Reply-Director/ Secretary, ICAR _____ Date _____ Brief _____ Content _____	Date received _____ Reply-DG, ICAR _____ Date _____ Brief _____ Content _____	_____ _____ _____ _____ _____